



Early Journal Content on JSTOR, Free to Anyone in the World

This article is one of nearly 500,000 scholarly works digitized and made freely available to everyone in the world by JSTOR.

Known as the Early Journal Content, this set of works include research articles, news, letters, and other writings published in more than 200 of the oldest leading academic journals. The works date from the mid-seventeenth to the early twentieth centuries.

We encourage people to read and share the Early Journal Content openly and to tell others that this resource exists. People may post this content online or redistribute in any way for non-commercial purposes.

Read more about Early Journal Content at <http://about.jstor.org/participate-jstor/individuals/early-journal-content>.

JSTOR is a digital library of academic journals, books, and primary source objects. JSTOR helps people discover, use, and build upon a wide range of content through a powerful research and teaching platform, and preserves this content for future generations. JSTOR is part of ITHAKA, a not-for-profit organization that also includes Ithaka S+R and Portico. For more information about JSTOR, please contact support@jstor.org.

this, and the extent of the treatment ranges from a single joint to the entire body. With each successive treatment the temperature and duration are increased, until from 300° to 350° Fahrenheit is reached and maintained for half an hour.

The newer methods have necessitated many changes in the work of the nurse, and have broadened her field in various directions. To enforce preventive measures is usually her work, and it is only with her hearty co-operation and loyal support that the physician can obtain his desired results. The present-day care of medical patients certainly affords many opportunities for satisfaction and pleasure to the nurse—to relieve pain, to reduce fever, to limit infection—this and much more has been made possible by the wonderful progress of the medical profession; and while we carry on our work and watch the splendid results of it all, we must needs agree with the patient who remarked that it surely is a marvellous thing, this “knowin’ whether to freeze ’em or to roast ’em,” in order to effect a cure.

THE CHANGING OUTLOOK OF NURSING

By L. L. DOCK, R.N.

Nor long ago a nurse of great experience in the management of registries said to me: “The progress of public hygiene and rural sanitation is making a vast change in private duty; it used to be that private nurses had an active service every fall in typhoid fever, because the people who had been away to the country would all come home and have typhoid; now this is entirely changed, and typhoid fever is almost unheard of, comparatively speaking. There is no doubt that sanitation, glad as we all are to have it, is lessening the work of private nurses, and some of them are having a hard time.”

My reply was: “They must be directed into lines of preventive work, for calls for that kind of duty are going to increase as rapidly, or more rapidly, than calls for typhoid fever and other filth diseases in the past.”

There is a great deal that is very suggestive in the above remark. It points to a change that is quietly but irresistibly coming over the prospects for the future of the trained nurse. Thirty years ago, private duty was almost the only field open to her, except a small variety of hospital positions. To-day there is a bewilderment of openings, many of them calling vainly for her because she has not yet made quite ready for them.

The new ideas of social betterment irresistibly demand a type of woman by nature fine, and by training and education highly finished, to carry on the many new lines of work which no one else can do as well as the nurse, just because her modern training school has given her a better foundation on which to build social specialties than that possessed by other women. Therefore a strong current is compelling high educational standards for her, and instead of getting lower they must and will get higher and higher, and those hospitals that fail to comprehend the drift of the times and their own duty to the public will be left in the very rear of progress and must content themselves with the incompetents and inefficient.

I predict that in ten years more the work of the tuberculosis propaganda for nurses, openings in public school work, hospital social service work, district nursing positions, positions as nurse in large industrial establishments, pure milk stations, preventive work among mothers of the uneducated classes and their children, tenement house inspection, schoolhouse inspection, and various branches of work under boards of health will more than counterbalance the past predominance of private duty. Add to this list the daily enlarging field of institutional work that is now open to nurses. Not only training-school work and head-nurse positions, in far larger number than was ever dreamed of twenty-five years ago, but heads of hospitals, as the roster of the Superintendents' Society shows very strikingly; positions in all kinds of special institutions, such as colonies for various kinds of unfortunates; now the vast mass of work for the insane is being offered to the study and sympathy of women of a higher grade of general, preliminary equipment than that invited into state hospitals in the past. Here is an enormous field which will in the future continually raise its standards and so both take in, and send forth, a more highly qualified worker. In all this there is no hint of a possibility of lower standards being acceptable. On the contrary there is an overwhelming demand for women of the highest type, and such women, recognizing the responsibilities and possibilities of the duties offered them, will not consent to waste their time over the bald and meagre professional outfit offered them by our friends of the correspondence and short term schools. This is a practical point invariably overlooked by these friends. They seem to rest assured that their power of attraction will be enough to bring to them just as good women for a wretched pretence at training as if they offered a genuine, dignified course; nay, more, they confidently assert that these admirable women will gladly work for seven or eight dollars a week, at their behest. Private duty of the most

laborious and most servile type is their only conception of nursing, and they remain unaware of the great changes going on about them.

We must not forget the large possibilities in our as yet non-nursed almshouses, and consider what it would mean in the way of equivalent work if every one of these, where there were patients, installed a nurse (as they should do) to care for them.

In private duty itself, whereas diphtheria and typhoid have almost disappeared, a new and far more delicate line of special work is already developing, in the care of psychopathic cases according to scientific psychology—a specialty that is only beginning to be more than rudimentary. As this new branch of nursing grows, it will call more than the ordinary woman with an ordinary training to its service.

Though private duty in the future may be less exciting than in the old days when contagious diseases were prevalent, the nurse will learn to reap satisfaction of another kind in realizing the social significance of her preventive work. We can only rejoice if typhoid fever disappears, as it should, even though every nurse loved her typhoid cases.

The new specialties for nurses mean that they can live a more normal life—go to bed at night, and keep in touch with other great things that are going on in the world. I hope that private duty will disappear altogether, for that will mean a high standard of public health, and then the nurses and physicians of the future can be employed entirely in keeping people well.

THE ADIRONDACK COTTAGE SANITARIUM AT TRUDEAU, N. Y.

By MADELINE SMITH, R.N.

Graduate of St. Luke's Hospital, Chicago

If any nurse thinks of contracting tuberculosis, may a kind Providence send her to the Adirondack Cottage Sanitarium, but let her not wait too long, for there only the incipient cases are taken.

The institution was founded by Dr. Edward L. Trudeau in 1884 and opened in February of the following year. Since that time it has grown from one building to about thirty-eight, including an administration building, a medical and reception building, twenty cottages, a chapel, infirmary, post office, library, amusement pavilion, laundry and necessary outbuildings. The property consists of two hundred acres